| Debtor 1 | Mation to identify your case: Kefentse Gwandoya Wheeler | | | | |
|----------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------------|--------------------------------------------------|--|
| Debtoi 1 | Full Name (First, Middle, Last) | | | | |
| Debtor 2 | Felicia Inez Wheeler | | | | |
| (Spouse, if filing) | Full Name (First, Middle, Last) | | | | |
| | SOUTHERN DISTRICT OF MISSISSIPPI | | | s an amended plan, and sections of the plan that | |
| Case number: | | | have been cha | _ | |
| (If known) | | | | 8 | |
| (, | | | | | |
| | | _ | | | |
| Chapter 13 l | Plan and Motions for Valuation and Lien Avoidance | | | 12/17 | |
| Chapter 10 1 | ini min i i i i i i i i i i i i i i i i | | | 12/1/ | |
| Part 1: Notice | | | | | |
| Tart I. Konce | | | | | |
| To Debtors: | This form sets out options that may be appropriate in some cases, but the prindicate that the option is appropriate in your circumstances or that it is per do not comply with local rules and judicial rulings may not be confirmable, debts must be provided for in this plan. | rmissible | in your judici | al district. Plans that | |
| | In the following notice to creditors, you must check each box that applies | | | | |
| To Creditors: | Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminated. | | | | |
| | You should read this plan carefully and discuss it with your attorney if you have an attorney, you may wish to consult one. | one in th | is bankruptcy c | ase. If you do not have | |
| | If you oppose the plan's treatment of your claim or any provision of this pla to confirmation on or before the objection deadline announced in Part 9 of t (Official Form 309I). The Bankruptcy Court may confirm this plan without is filed. See Bankruptcy Rule 3015. | he Notic | e of Chapter 1 | 3 Bankruptcy Case | |
| | The plan does not allow claims. Creditors must file a proof of claim to be paid un | nder any | plan that may b | e confirmed. | |
| | The following matters may be of particular importance. Debtors must check on plan includes each of the following items. If an item is checked as "Not Incluprovision will be ineffective if set out later in the plan. | | | | |
| | t on the amount of a secured claim, set out in Section 3.2, which may result in al payment or no payment at all to the secured creditor | _ Incl | uded | ✓ Not Included | |
| 1.2 Avoida | nnce of a judicial lien or nonpossessory, nonpurchase-money security interest, in Section 3.4. | _ Incl | uded | ✓ Not Included | |
| | ndard provisions, set out in Part 8. | ☐ Incl | uded | ✓ Not Included | |
| Part 2: Plan P | Payments and Length of Plan | | | | |
| | · · | | | | |
| 2.1 Length | of Plan. | | | | |
| | | | | | |
| | shall be for a period of 60 months, not to be less than 36 months or less than 6 onths of payments are specified, additional monthly payments will be made to the explan. | | | | |
| 2.2 Debtor | r(s) will make payments to the trustee as follows: | | | | |
| Debtor shall pay the court, an Orde | \$2,636.00 (monthly, semi-monthly, weekly, or bi-weekly) to the directing payment shall be issued to the debtor's employer at the following address | | 13 trustee. Unle | ess otherwise ordered by | |
| | Johnson Controls | | | | |
| | 5757 N Green Bay Ave | | | | |
| | Milwaukee WI 53209-0000 | | | | |
| | | | | | |

25-50786 Dkt 2 Filed 05/29/25 Entered 05/29/25 14:57:26 Page 2 of 5

| Debtor | | itse Gwandoya Wheeler a Inez Wheeler | | Case number | er | |
|----------------------------|------------------------|-------------------------------------------------------------------------------------------------------|----------------------------|----------------------|--------------------------------------|----------------|
| | | (monthly, semi-mont g payment shall be issued to the j | | | | ordered by the |
| | | | | | | |
| 2.3 | Income tax r | eturns/refunds. | | | | |
| | Check all that ✓ Deb | t apply tor(s) will retain any exempt inco | me tax refunds received of | during the plan tern | 1. | |
| | | tor(s) will supply the trustee with rn and will turn over to the trustee | | | | f filing the |
| | ☐ Deb | tor(s) will treat income refunds as | s follows: | | | |
| 2.4 Addi t Check | tional paymen | its. | | | | |
| | ✓ Non | e. If "None" is checked, the rest | of § 2.4 need not be comp | oleted or reproduce | 1. | |
| Part 3: | | f Secured Claims | | | | |
| 3.1 | | Except mortgages to be crammo | ed down under 11 U.S.C | c. § 1322(c)(2) and | identified in § 3.2 herein.). | |
| | None. If "N | t apply. None" is checked, the rest of § 3.1 | need not be completed o | r reproduced. | | |
| 3.1(a) | 1322(b)(5) | Residence Mortgages: All long to shall be scheduled below. Absent by the mortgage creditor, subject | an objection by a party in | n interest, the plan | will be amended consistent with | the proof of |
| 1 Beginnir | Mtg pmts | | 335.41 | Direct. Include | es escrow 🗸 Yes 🗌 No | |
| 1 | Mtg arrear | | Through | May 2025 | ,s esero w 👺 1 es 🗀 1 to | \$1,120.00 |
| | _ | | | | | · • |
| 3.1(b) _ | U.S.C. § | incipal Residence Mortgages: A \$1322(b)(5) shall be scheduled be f of claim filed by the mortgage of | elow. Absent an objection | by a party in inter | est, the plan will be amended cor | nsistent with |
| Property | -NONE- address: | | | | | |
| Mtg pmt Beginnir | | @ | Plan | Direct. | Includes escrow Yes No | |
| | | g arrears to | | Direct. | | |
| 3.1(c) | | ge claims to be paid in full over nt with the proof of claim filed by | | n objection by a pa | rty in interest, the plan will be ar | nended |
| Creditor | -NONE- | Approx. amt. | | Int. Rate*: | | |
| Property | Address: | | | | | |
| (as stated | d in Part 2 of th | e paid with interest at the rate abo | | | | |
| | | paid without interest: \$ss Principal Balance) | | | | |
| Special of | claim for taxes | /insurance: \$ | -NONE- /month, b | eginning month | | |

| Debtor | Kefentse Gwandoya Wheele Felicia Inez Wheeler | Case number | | | |
|-----------|-----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| (as state | ed in Part 4 of the Mortgage Proof of Clair | n Attachment) | | | |
| | therwise ordered by the court, the interest dditional claims as needed. | rate shall be the current Till rate in this District | | | |
| 3.2 | Motion for valuation of security, payn | ent of fully secured claims, and modification of undersecured claims. Check one | | | |
| | None. If "None" is checked, th | e rest of § 3.2 need not be completed or reproduced. | | | |
| 3.3 | Secured claims excluded from 11 U.S. | cured claims excluded from 11 U.S.C. § 506. | | | |
| | Check one. None. If "None" is checked, the | e rest of § 3.3 need not be completed or reproduced. | | | |
| 3.4 | Motion to avoid lien pursuant to 11 U. | S.C. § 522. | | | |
| Check or | | e rest of § 3.4 need not be completed or reproduced. | | | |
| 3.5 | Surrender of collateral. | | | | |
| | The debtor(s) elect to surrende that upon confirmation of this | e rest of § 3.5 need not be completed or reproduced. to each creditor listed below the collateral that secures the creditor's claim. The debtor(s) request claim the stay under 11 U.S.C. § 362(a) be terminated as to the collateral only and that the stay all respects. Any allowed unsecured claim resulting from the disposition of the collateral will be | | | |
| Truiet | Name of Creditor | Collateral 2022 Infiniti QX80 32500 miles | | | |
| Part 4: | Iditional claims as needed. Treatment of Fees and Priority Clain | s | | | |
| 4.1 | General Trustee's fees and all allowed priority cl without postpetition interest. | aims, including domestic support obligations other than those treated in § 4.5, will be paid in full | | | |
| 4.2 | Trustee's fees Trustee's fees are governed by statute and may change during the course of the case. | | | | |
| 4.3 | Attorney's fees. | | | | |
| | ✓ No look fee: 4,600.00 | | | | |
| | Total attorney fee charged: | \$4,600.00 | | | |
| | Attorney fee previously paid: | \$227.00 | | | |
| | Attorney fee to be paid in plan per confirmation order: | \$4,373.00 | | | |
| | Hourly fee: \$ (Subject to appr | oval of Fee Application.) | | | |
| 4.4 | Priority claims other than attorney's fees and those treated in § 4.5. | | | | |
| | Check one. None. If "None" is checked, the Internal Revenue Service | e rest of § 4.4 need not be completed or reproduced. \$26.700.00 | | | |

| Debtor | | Kefentse Gwandoya Wheeler Felicia Inez Wheeler | Case number |
|----------|----------------------------|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | Mississippi Dept. of Revenue | \$0.00 |
| | Ш | Other | |
| 4.5 | Domes | tic support obligations. | |
| | ✓ | None. If "None" is checked, the re- | t of § 4.5 need not be completed or reproduced. |
| Part 5: | | ment of Nonpriority Unsecured Cla iority unsecured claims not separat | |
| V | Allowe providi The s | ad nonpriority unsecured claims that a ng the largest payment will be effection of \$ 0.00 % of the total amount of these claims | e not separately classified will be paid, pro rata. If more than one option is checked, the optio re. Check all that apply. |
| | | | I under chapter 7, nonpriority unsecured claims would be paid approximately \$0.00 ayments on allowed nonpriority unsecured claims will be made in at least this amount. |
| 5.2 | Other | separately classified nonpriority un | secured claims (special claimants). Check one. |
| | ✓ | None. If "None" is checked, the res | t of § 5.3 need not be completed or reproduced. |
| Part 6: | Execu | tory Contracts and Unexpired Leas | es |
| 6.1 | | ecutory contracts and unexpired leacts and unexpired leases are rejecte | ses listed below are assumed and will be treated as specified. All other executory l. Check one. |
| | ✓ | None. If "None" is checked, the re- | t of § 6.1 need not be completed or reproduced. |
| Part 7: | Vestin | ng of Property of the Estate | |
| | | | w(a) unan antwo of disabanca |
| 7.1 | _ | ty of the estate will vest in the debte | r(s) upon entry of discharge. |
| Part 8: | Nonst | andard Plan Provisions | |
| 8.1 | Check | "None" or List Nonstandard Plan None. If "None" is checked, the re- | Provisions t of Part 8 need not be completed or reproduced. |
| Part 9: | Signat | tures: | |
| complete | tor(s) an address | and telephone number. | sst sign below. If the Debtor(s) do not have an attorney, the Debtor(s) must provide their |
| X /s/ | Kefent | se Gwandoya Wheeler Gwandoya Wheeler | X /s/ Felicia Inez Wheeler Felicia Inez Wheeler |
| | | f Debtor 1 | Signature of Debtor 2 |
| Exc | ecuted o | n May 29, 2025 | Executed on May 29, 2025 |
| 12 | 4 Morre | ell Cir | 124 Morrell Cir |
| | dress | | Address |
| | | rg MS 39402-0000 | Hattiesburg MS 39402-0000 |
| Cit | y, state, | and Zip Code | City, State, and Zip Code |

25-50786 Dkt 2 Filed 05/29/25 Entered 05/29/25 14:57:26 Page 5 of 5

| Debtor | Felicia Inez Wheeler | Case number | |
|--------|-----------------------------------------------------|-------------------|--|
| Telep | hone Number | Telephone Number | |
| | homas C. Rollins, Jr. nas C. Rollins, Jr. 103469 | Date May 29, 2025 | |
| | ture of Attorney for Debtor(s) | | |
| | Box 13767 son, MS 39236 | | |
| | ess, City, State, and Zip Code | | |
| 601- | 500-5533 | 103469 MS | |
| Telep | hone Number | MS Bar Number | |
| trolli | ns@therollinsfirm.com | | |
| Emai | l Address | | |